

LOBBYIST MONTHLY REPORT FORM

Page 1 of 6 Page(s)
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State of Idaho

Ben Ysursa
Secretary of State

To Be Filed By:
L-3 LOBBYISTS
(Sec. 67-6619)

APR -9 AM 10:58
SECRETARY OF STATE
STATE OF IDAHO

(Type or print clearly in black ink)
See instructions at bottom of page

| | | |
|---|-----------------------------|--|
| Lobbyist's name and permanent business address Patrick J. Sullivan SULLIVAN & REBERGER PO BOX 1703 BOISE ID 83701 | Date prepared 4/3/07 | Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr.) 3 31 07 |
|---|-----------------------------|--|

| | | | | | |
|---|--|--|-----------------------|-----------------------|-----------------------|
| Item 1 | Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer. | | | | |
| Category of Expenditure | * Total Amount for All Employers | Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.) | | | |
| | | Employer No. 1 | Employer No. 2 | Employer No. 3 | Employer No. 4 |
| Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity <i>Do Not Have to be Reported</i> | | | | | |
| Entertainment | \$ 1017.44 | 0 | \$ 183.92 | 0 | 0 |
| Food and Refreshment | | | | | |
| Living Accommodations | | | | | |
| Advertising | | | | | |
| Travel | | | | | |
| Telephone | | | | | |
| Other Expenses or Services | | | | | |
| Total | \$ 1017.44 | 0 | 183.92 | 0 | 0 |

*When the number of employers you are reporting for requires multiple L-3 forms to be filed a total amount for all employers should be entered on Page 1.

| | | | | |
|---------------|---|--------------|---------------|---|
| Item 2 | The totals of each expenditure of more than fifty dollars (\$50) for a legislator or other holder of public office. | | | |
| | Date | Place | Amount | Names of Legislators & Public Officials in Group |
| | | | | |

Continued on attached page(s)

| | | | | | | | | | | | |
|---|---|---------------|--|------|---|------|--|------|---|------|--|
| INSTRUCTIONS Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code. Filing deadline: Monthly reports due within ten (10) days of the month for activities of the past month. TO BE FILED WITH: Ben Ysursa Secretary of State PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282 | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%; text-align: center;">Item 3</td> <td>Employer(s) Name(s) and Address(es)</td> </tr> <tr> <td style="text-align: center;">No.1</td> <td>ADVANTAGE WORKER COMPENSATION PO Box 571918, SLC, UT 84157</td> </tr> <tr> <td style="text-align: center;">No.2</td> <td>ASSOCIATED GENERAL CONTRACTORS 110 N. 27th, Boise, ID 83702</td> </tr> <tr> <td style="text-align: center;">No.3</td> <td>BATELLE ENERGY ALLIANCE PO Box 1625, Id. Falls, ID 83415</td> </tr> <tr> <td style="text-align: center;">No.4</td> <td>CHM2-WG IDAHO LLC. PO Box 1625, Idaho Falls, ID 83417</td> </tr> </table> | Item 3 | Employer(s) Name(s) and Address(es) | No.1 | ADVANTAGE WORKER COMPENSATION PO Box 571918, SLC, UT 84157 | No.2 | ASSOCIATED GENERAL CONTRACTORS 110 N. 27th, Boise, ID 83702 | No.3 | BATELLE ENERGY ALLIANCE PO Box 1625, Id. Falls, ID 83415 | No.4 | CHM2-WG IDAHO LLC. PO Box 1625, Idaho Falls, ID 83417 |
| Item 3 | Employer(s) Name(s) and Address(es) | | | | | | | | | | |
| No.1 | ADVANTAGE WORKER COMPENSATION PO Box 571918, SLC, UT 84157 | | | | | | | | | | |
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Item 1 Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer.

| Category of Expenditure <small>Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported</small> | * Total Amount for All Employers | Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.) | | | |
|---|----------------------------------|---|----------------------|----------------------------|----------------------|
| | | Employer No <u>5</u> | Employer No <u>6</u> | Employer No <u>7</u> | Employer No <u>8</u> |
| Entertainment | \$ _____ | \$ <u>875</u> | \$ <u>0</u> | \$ <u>205⁶⁷</u> | \$ <u>0</u> |
| Food and Refreshment | \$ _____ | | | | |
| Living Accommodations | \$ _____ | | | | |
| Advertising | \$ _____ | | | | |
| Travel | \$ _____ | | | | |
| Telephone | \$ _____ | | | | |
| Other Expenses or Services | \$ _____ | | | | |
| Total | \$ <u>0.00</u> | \$ <u>875</u> | \$ <u>0</u> | \$ <u>205⁶⁷</u> | \$ <u>0</u> |

*When the number of employers you are reporting for requires multiple L-3 forms to be filed a total amount for all employers should be entered on Page 1.

Item 2 The totals of each expenditure of more than fifty dollars (\$50) for a legislator or other holder of public office.

| Date | Place | Amount | Names of Legislators & Public Officials in Group |
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| | <hr/> 6. CORRECTIONAL MEDICAL SERVICES 12647 Olive Blvd., St. Louis, MO 63141 |
| | <hr/> 7. ELI LILLY CORPORATION 161 St. Anthony, Ste. 820, St. Paul MN 55103 |
| | <hr/> 8. FMC Corporation 1101 Pennsylvania. #325. Washington DC 20004 |

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| Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported | * Total Amount for All Employers | Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.) | | | |
| | | Employer No. <u>9</u> | Employer No. <u>10</u> | Employer No. <u>11</u> | Employer No. <u>12</u> |
| Entertainment | \$ _____ | \$ <u>Ø</u> | \$ <u>Ø</u> | \$ <u>334.89</u> | \$ <u>Ø</u> |
| Food and Refreshment | \$ _____ | | | | |
| Living Accommodations | \$ _____ | | | | |
| Advertising | \$ _____ | | | | |
| Travel | \$ _____ | | | | |
| Telephone | \$ _____ | | | | |
| Other Expenses or Services | \$ _____ | | | | |
| Total | \$ <u>0.00</u> | \$ <u>Ø</u> | \$ <u>Ø</u> | \$ <u>334.89</u> | \$ <u>Ø</u> |

*When the number of employers you are reporting for requires multiple L-3 forms to be filed a total amount for all employers should be entered on Page 1.

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| Item 2 | The totals of each expenditure of more than fifty dollars (\$50) for a legislator or other holder of public office. | | | |
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| | | Employer No. <u>3</u> | Employer No. <u>4</u> | Employer No. <u>5</u> | Employer No. <u>6</u> |
| Entertainment | \$ _____ | \$ <u>0</u> | \$ <u>0</u> | \$ <u>0</u> | \$ <u>0</u> |
| Food and Refreshment | \$ _____ | | | | |
| Living Accommodations | \$ _____ | | | | |
| Advertising | \$ _____ | | | | |
| Travel | \$ _____ | | | | |
| Telephone | \$ _____ | | | | |
| Other Expenses or Services | \$ _____ | | | | |
| Total | \$ _____ | \$ <u>0</u> | \$ <u>0</u> | \$ <u>0</u> | \$ <u>0</u> |

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| Item 2 | The totals of each expenditure of more than fifty dollars (\$50) for a legislator or other holder of public office. | | | |
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| | | Employer No. 17 | Employer No. 18 | Employer No. 19 | Employer No. 20 |
| Entertainment | \$ _____ | \$ <u>6513</u> | \$ _____ | \$ _____ | \$ <u>219⁰⁸</u> |
| Food and Refreshment | \$ _____ | _____ | _____ | _____ | _____ |
| Living Accommodations | _____ | _____ | _____ | _____ | _____ |
| Advertising | _____ | _____ | _____ | _____ | _____ |
| Travel | _____ | _____ | _____ | _____ | _____ |
| Telephone | _____ | _____ | _____ | _____ | _____ |
| Other Expenses or Services | _____ | _____ | _____ | _____ | _____ |
| Total | \$ <u>0.00</u> | \$ <u>6513</u> | \$ <u>0.00</u> | \$ <u>0.00</u> | \$ <u>219⁰⁸</u> |

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|---|----------------------------------|---|----------------|----------------|----------------|
| | | Employer No. <u>21</u> | Employer No. | Employer No. | Employer No. |
| Entertainment | \$ _____ | \$ <u>0</u> | \$ _____ | \$ _____ | \$ _____ |
| Food and Refreshment | \$ _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
| Living Accommodations | \$ _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
| Advertising | \$ _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
| Travel | \$ _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
| Telephone | \$ _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
| Other Expenses or Services | \$ _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
| Total | \$ 0.00 | \$ 0.00 | \$ 0.00 | \$ 0.00 | \$ 0.00 |

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| | <p> </p> |

Item 4 Expenditures made by the lobbyist or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible personal property to any Legislator, or for or on behalf of any legislator.

| Date | Amount | Name of Legislator Receiving or Benefited |
|------|--------|---|
| | | |

Item 5 Subject matter of proposed legislation, the number of the Senate or House Bill, Resolution or other legislative activity in which the Lobbyist was supporting or opposing.

| Subject Code (From table) | Bill, Resolution or Other Legislative Mast. Number | Appropriation Bill Number and Section Number |
|---------------------------|--|--|
| | | |

LEGISLATIVE SUBJECT IDENTIFICATION

- | | |
|--|---|
| Code Subject | Code Subject |
| 01 Agriculture, horticulture, farming, and livestock | 17 Health service, medicine, drugs and controlled substances, health insurance, hospitals |
| 02 Amusements, games, athletics and sports | 18 Higher education |
| 03 Banking, finance, credit and investments | 19 Housing, construction, codes |
| 04 Children, minors, youth, senior citizens | 20 Insurance (excluding health insurance) |
| 05 Church and religion | 21 Labor, salaries and wages, collective bargaining |
| 06 Consumer affairs | 22 Law enforcement, courts, judges, crimes, prisons |
| 07 Espionage, environment, pollution, conservation, zoning, land and water use | 23 Licenses, permits |
| 08 Education | 24 Liquor |
| 09 Elections, campaigns, voting, political parties | 25 Manufacturing, distribution and services |
| 10 Equal rights, civil rights, minority affairs | 26 Natural resources, forest and forest products, fisheries, mining and mining products |
| 11 Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds | 27 Public health, parks, recreation |
| 12 Government, county | 28 Social insurance, unemployment insurance, public assistance, workmen's compensation |
| 13 Government, federal | 29 Transportation, highways, streets and roads |
| 14 Government, municipal | 30 Utilities, communications, television, radio, newspaper, power, CATV, gas |
| 15 Government, special districts | 31 Other (please specify) _____ |
| 16 Government, state | |

CERTIFICATION: I hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6226 Idaho Code.

R. J. Sullivan
 Lobbyist signature _____ Date _____